

<p style="text-align: center;"><b>AB 1507 (Pavley)</b> <b>Automated External Defibrillators (AED's)</b> <b>Coauthor: Assemblymember Koretz, and Vargas, Senators Alquist and Romero</b></p>
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**PURPOSE**

To ensure the health and safety of members using health club facilities.

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**PROBLEM**

Strenuous physical activity is common in Health Clubs and may trigger a SCA (Sudden Cardiac Arrest). SCA victims are clinically dead; i.e., they are unresponsive, not breathing and have no pulse and, as a result, intervention is required within minutes if the life of the victim is to be saved. Sixty percent of all SCA victims experience a heart arrhythmia for which the Automated External Defibrillator (AED) is designed to correct. Therefore, the placement of AED's in Health Clubs will save SCA victims lives by reducing the time between the SCA victim's collapse and the first defibrillation shock. AED's have been proven to be effective if applied quickly. In addition to saving a SCA victim's life, they can help reduce neurological impairment resulting from prolonged oxygen deprivation. Due to the fact that SCA's are almost always witnessed in Health Clubs, the likelihood of a positive outcome is dramatically improved.

According the American Heart Association 60% of sudden cardiac arrests are witnessed, and can be reversed if the victim is treated with an AED within a few minutes. Survival is linked to the amount of time between the onset of sudden cardiac arrest and defibrillation.

Currently there is no requirement that health club facilities install AED's in their facilities, although there are some clubs that are voluntarily doing so. This bill will ensure all facilities have AED's on site and that their staff is trained in their use.

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**CURRENT LAW**

In 1999, the Legislature enacted SB 911 (Figueroa), to provide a qualified immunity

from civil liability for trained persons who use in good faith and without compensation an AED in rendering emergency care or treatment at the scene of an emergency. The qualified immunity would also extend to those businesses that purchased the device, the medical authority that prescribed the device, and the agency that trained the person in the AED use, provided that specified training and maintenance requirements were met. The immunities do not apply in cases of personal injury resulting from gross negligence of willful or wanton misconduct.

In 2002, the Legislature enacted AB 2041 (Vargas), to modify the conditions for immunizing the AED user and purchasing business. It eliminated the CPR and AED-use training requirements for users and relaxed the facility's training and staffing requirements. AB 2041 was enacted with a five-year sunset to allow an assessment of its broader immunity provisions.

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**BACKGROUND**

An AED is a small, lightweight medical device used to assess a person's heart rhythm and, if necessary, administer an electric shock through the chest wall to restore a normal heart rhythm in victims of sudden cardiac arrest. Built-in computers assess the patient's heart rhythm, determine whether the person is in cardiac arrest, and signal whether to administer the shock. Audible cues guide the user through the process. Portable AEDs are available upon a prescription from a medical authority. Their general cost is about \$2,000 per unit.

According to the American College of Emergency Physicians website, when a person suffers a sudden cardiac arrest, chances of survival decrease by 7 to 10 percent for each minute that passes without defibrillation. A victim's best chance for survival is when there is revival within four minutes. However, AEDs are less successful when the victim has been in cardiac arrest for more than a few minutes, especially if no cardiopulmonary resuscitation (CPR) was provided.

Standard CPR training (which includes AED training) by the American Red Cross and the American Heart Association costs \$45 per class. This cost, however, is negligible when compared with the cost the state and the counties incur when having to care for patients that sustain major medical injuries and disabilities as a result of tardy resuscitation.

Also, the American Red Cross states that recent improvements in AED technology have resulted in almost fool-proof devices. Today's new AEDs use embedded computer chips to analyze the rhythms instantly and accurately, making it possible for non-medical professionals to administer the same service without risking an accidental shock.

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## COMMENTS

Health Clubs are in the business of providing a service to their members. Included in that service should be the assurance that if a member has a sudden cardiac arrest the health club would have an AED on site. Health clubs should take every and all precautions to ensure their members are safe at all times while in their facility.

This bill attempts to save a greater number of lives by increasing the availability of AEDs at health clubs. Because traditional emergency personnel usually cannot reach a victim within the time window that defibrillation is most effective, the likelihood that a cardiac arrest victim will survive is dramatically increased if AEDs are readily available to assist them.

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## THIS BILL

This bill requires that every health club facility purchase and install Automated External Defibrillators (AEDs) as well as train personnel in their use. It provides immunity from civil damages to any employee, member of a board of directors of a health club, or the health club itself, provided the health club uses an AED consistent with the terms of the bill. It also requires that the facilities meet the bill's requirements by July 1, 2007. The bill sunsets the mandate of purchasing AED's on July 1, 2007.

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## SUPPORT

American Heart Association  
American Red Cross  
California Fire Chiefs Association  
California State Firefighters Association  
(sponsor)  
Emergency Medical Services Administrators' Association of California  
Fire Districts Association of California  
League of California Cities  
National Center for Early Defibrillation  
Philip Medical Systems  
Santa Clara County Fire Chief's Association  
Sudden Cardiac Arrest Survivor Association  
Sudden Cardiac Arrest Survivor Network  
University of Pittsburgh- Scholl of Medicine;  
Dept of EMS  
YMCA

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## OPPOSITION

None on file.

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## FOR MORE INFORMATION

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